STATE OF CONNECTICUT DEPARTMENT OF PUBLIC HEALTH BUREAU OF REGULATORY SERVICES

Re: Elizabeth Rescigno, R.N. Petition No. 2001-0531-010-032

License No.: E55521

VOLUNTARY SURRENDER OF LICENSE AFFIDAVIT

Elizabeth Rescigno, being duly sworn, deposes and says:

- 1. I am over the age of majority and understand the obligations of an oath.
- 2. I make this affidavit on the basis of personal knowledge.
- 3. I am licensed by the Department of Public Health (hereinafter "the Department") to practice as a registered nurse. I presently hold license number E55521.
- 4. I hereby voluntarily surrender my license to practice as a registered nurse in the State of Connecticut.
- 5. I understand and agree that if I seek a new license or to reinstate my license at any time in the future, the allegations contained in Petition Number 2001-0531-010-032 shall be deemed true. I further understand that any such application must be made to the Board of Examiners for Nursing (hereinafter "the Board") and the Department, and that the Board shall be a signatory to any order reinstating my license or granting me a new license.
- 6. I hereby waive any right to a hearing I may have regarding any request that my license be reinstated or that a new license be issued and also waive any right that I may have to appeal or otherwise challenge the disposition of any such request.
- 7. I understand and agree that this affidavit and the case file in Petition Number 2001-0531-010-032 are public documents, and I am executing this affidavit in settlement of the allegations contained in the above-referenced petition.
- 8. I understand that this document has no effect unless and until it is executed by the Department; and that, upon execution, the Department will dismiss Petition No. 2001-0531-010-032.

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	Elizabeth Rescigno
Subscribed and sworn to before me this	day of
	Notary Public Commissioner of Superior Court My Commission Expires
Accepted: Debra J. Turcotte, Director	S 13 - 0 Date
Division of Health Systems Regulation	